



CONTINUUM OF DIRECT CARE SERVICE DELIVERY

FACILITY SETTINGS

HOME AND COMMUNITY-BASED SERVICES

| | Community Supports (non-residential) | Supports to Individuals and Families | Community Residential | Hospitals Intermediate Care Facilities/ID | |
|---|---|--------------------------------------|-------------------------|---|--|
| | Day Services and Programs | Home Health | Assisted Living | Nursing Facilities Residential Care Facilities | |
| | Respite | Hospice | Group Homes | | |
| | Supported Employment | Personal Assistance and Support | Semi-independent Living | State Mental Health Institutes | |
| | | Personal Care | | State Resource Centers | |
| \ | | Respite | | | |
| | | Supported Community Living | | | |

WHO ARE DIRECT CARE PROFESSIONALS?

Direct care professionals (DCPs) are defined as individuals who provide supportive services and care to people experiencing illnesses or disabilities and who receive compensation for such services. This definition excludes nurses, case managers and social workers. "Direct care professional" is the umbrella name for the workforce. DCPs are commonly called direct support professionals, direct care workers, supported community living workers, home health aides, certified nurse aides, and many other job titles.

WHAT DO DIRECT CARE PROFESSIONALS DO?

Direct care professionals provide a wide range of services and supports to individuals with intellectual disabilities, physical disabilities, and aging lowans, including:

- » Assisting with skill-building and achieving personal goals, including vocational, educational and career support; building and maintaining friendships; crisis prevention and intervention
- » Services that help someone live independently at home or in the community, such as managing money, grocery shopping, cooking, cleaning
- » Services to help someone meet their basic needs, such as bathing; dressing and undressing, eating (includes feeding), toileting, and assistance moving around
- » Medically oriented services to help individuals maintain their health, including catheter care, ostomy care, checking vitals, range of motion exercises

NUMBER OF WORKERS AND WHERE THEY WORK

Current Employment. Direct care professionals are the single largest workforce in lowa. In 2012, there are an estimated 73,000 direct care professionals providing services. (Direct Care Worker Advisory Council, March 2012 Final Report)

Wide Range of Settings. Direct care professionals are employed in a range of settings: the consumer's or family's home; facilities such as nursing facilities, hospitals, and large facilities for persons with intellectual and developmental disabilities; community-based residential settings ranging from group homes to assisted living facilities; plus a wide range of non-residential day programs and other community support services.

Home and community-based jobs dominate direct care employment. The majority of direct care professionals are now employed in home and community-based settings. By 2018, home and community-based direct care professionals are likely to outnumber facility workers by nearly two to one.



WHO ARE DIRECT CARE PROFESSIONALS?

Source: Bureau of Labor Statistics and Iowa Medicaid Enterprise

Direct care professionals (DCPs) are individuals who provide supportive services and care to people who are aging or experiencing illness or disabilities. DCPs are commonly called direct support professionals, direct care workers, supported community living workers, home health aides, certified nurse aides, and many other job titles.

The three categories below represent job classifications used by the U.S. Department of Labor's Bureau of Labor Statistics — the vast majority of DCP's fall into one of these groups. These numbers were used by the lowa Direct Care Worker Advisory Council to estimate the size of the direct care workforce.

At about 73,000 individuals, DCPs are lowa's largest workforce.

30,938 •-----Personal and Home Care Aides

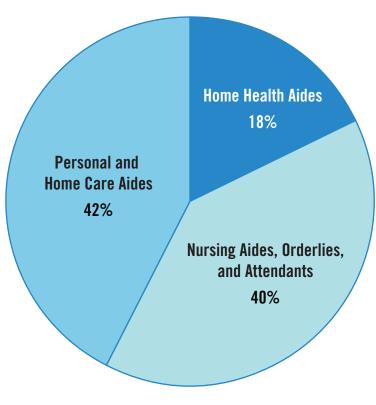
Often called direct support professionals, these workers provide support services such as implementing a behavior plan, teaching self-care skills and providing employment support, as well as providing a range of other personal assistance services.

29,168 • Nursing Aides, Orderlies, and Attendants

Most Nursing Aides have received specific training for the job and some have received their certification as a Certified Nursing Assistant (CNA) in lowa. According to the Department of Labor, Nursing Aides provide hands-on care under the supervision of nursing and medical staff in hospitals and nursing care facilities, although they do work in home and community based settings as well.

13,108 • Home Health Aides

Home health aides typically work for home health or hospice agencies and work under the direct supervision of a medical professional. These aides provide support to people in their homes, residential facilities, or in day programs.







IOWA'S PERSONAL AND HOME CARE AIDE STATE TRAINING GRANT

Developing and Testing Standardized Training and Credentialing Infrastructure

A NATIONAL MODEL

- » Based on the work of the Direct Care Worker Advisory Council and the state's ongoing investments in improving the direct care workforce, lowa was one of six states awarded the federal Personal and Home Care Aide State Training (PHCAST) grant in 2010.
- » The purpose of the grant is to develop a national model to improve recruitment and retention of the direct care workforce through:
 - 1) Standardized training
 - 2) Credentialing

STAKEHOLDER-DRIVEN CURRICULUM

- » Curriculum competencies, content, and resources/handouts have been developed for the required Core training module and the five advanced training modules.
- » Competencies have been developed for two specialty training areas: positive behavior supports and Alzheimer's/dementia.
- » Individuals from more than 30 stakeholder organizations were involved in development and review, and curriculum was also reviewed by the six direct care professionals (DCPs) on the DCP Education Review Committee.

Individuals involved in curriculum development said:

"It was a very good way to develop (curriculum) – we had to look outside our comfort zone."

"I liked the vastness of diversity (of fields represented in curriculum development)."

"The facilitator (of the curriculum committee) added person-centered care to the process and brought in the whole person."

TRAINING DELIVERY AND CREDENTIALS

- » 53 instructors from employers and community colleges have been trained to teach the training modules.
- » Courses are being delivered in employer and community college settings.
- » Almost 300 direct care professionals have taken training.
- » DCPs receive an interim Direct Care Associate credential upon completion of the Core training.
- » Advanced credential exams will be available in April, providing eligibility for interim advanced credentials.

Evaluation so far shows:

100% of participating DCPs are gaining knowledge, and of those who score low on the pre-test (scoring less than 5 out of 10), their knowledge gain is significant and high (from 3.94 to 7.52).

97% of DCPs are very or somewhat satisfied with the training.

Most DCPs (67%) say they plan to stay in direct care as long as possible and 84% say they speak highly of direct care work to their friends.

LEADERSHIP AND MENTORING SUPPORTS

- » 45 DCPs have been trained in leadership and 37 have been trained in mentoring.
- » Continuing education and leadership opportunities are promoted to participating DCPs.

"I now view the importance of retaining staff as higher priority." – a mentor training graduate

DATA AND INFORMATION TO INFORM THE PUBLIC AND WORKFORCE PROJECTIONS

- » A website is being developed for:
 - DCPs to apply for and manage credentials
 - Consumers and employers to look up information about DCPs
 - Data collection and tracking of the workforce
- » The IT system provides data-sharing and automation to streamline processes and create efficiencies for application review, approval, and background checks.